UNDERSTANDING SUPPLY AND DEMAND TO IMPROVE HEALTH PRODUCT AVAILABILITY FROM INITIAL RESPONSE THROUGH SUSTAINABLE RECOVERY IN HUMANITARIAN SETTINGS

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Photo: UNFPA.org
The nature of humanitarian crises is changing; emergencies are becoming more frequent, more complex, longer-lasting, and further-reaching.

Protracted emergencies affecting more people & lasting longer, population movement more fluid & woven into surrounding communities; thus more nuanced and tailored models of humanitarian support are required, including better ways to satisfy demand and make sure products and services are used by those who need them.

Now services often provided in host communities not only camps across the stages of an emergency, especially protracted and recovery.

Emergencies happen unexpectedly & are long lasting; flexibility needed.
JSI has supported UNFPA, USAID, and OFDA responding to increasing demand and uptake in use of services and supplies

- Through the Inter-Agency Working Group (IAWG), JSI supports the process of determining the Minimum Initial Service Package (MISP) for RH, a priority set of life-saving activities to be implemented at the onset of every humanitarian crisis.
- JSI supports UNFPA to review and strengthen the process of forecasting, quantifying, and supply planning globally, regionally, and nationally.
- OFDA support to develop a manual for pharmaceutical supply management and training.
- Extensive USAID support during the Nepal earthquake, Sierra Leone, Guinea, and Liberia during the Ebola outbreak, South Sudan in the delivery of essential medicine kits, beginning work in Iraq’s Ninewa plains, among many other fragile states in which we have supported both health and supply chain response efforts.
Countries face challenges supplying and responding to increasing demand for health products globally

Countries experience interruptions in supply, especially during transitions from acute to protracted and recovery phase:

- Interrupted, duplicative financing
- Incomplete forecasting and supply planning methods, tools, and processes across actors (government, UN, NGO suppliers, etc.)
- Inconsistent use of inventory management tools, policies and procedures across phases
- Lack of guidance for procurement policies and procedures; limited sources of quality products (national, regional, global), lack of clarity on whether to procure kits or individual product
- Overlapping supply chain and transportation routes
- Gaps in data visibility & weak/non-existent information systems
- Slow freight forwarding and registration processes
- Difficulties adhering to rational use and treatment guidelines
- Challenges in using humanitarian versus development delivery: risk of drop in attendance rate; sustained humanitarian delivery substituting for normal supply chains; progressive weakening of health system; weakening of accountability and supply chain
We developed a forecasting tool for ERH kits in preparedness and acute phases

- **Data Entry**: Pulls key data inputs from IAWG, allows user to enter in adjusted site-specific figures
- **Results Dashboard**: Customizable dashboard by kit type, displays total number of kits and total cost of kits
- **Characteristics of Target Population**: Detailed breakdown of population data (e.g. delivery services & family planning) allows user to enter in adjusted site-specific figures
- **Commodity Estimates**: Detailed breakdown of annual data by kit, including products, dosage, client load, annual kit estimates, and annual cost estimates.
- **Product cost**: Cost per kit
The tool was validated globally and nationally.

**Compatibility:** Tool was tested in New York, Copenhagen, Jordan, and Sierra Leone and shared with multiple countries virtually. All feedback was incorporated.

**Data Sources:** Inter-Agency Reproductive Health Kits for Use in Crisis Situations, Guidelines on Data Issues In Humanitarian Crisis Situations, My Access RH Website, UNOCHA, WHO Best Practice Treatment Guidelines.
We provided technical assistance in Cox Bazaar in a chronic phase

• TBD
Chlorhexidine: A Game Changer for Saving Newborns Lives That Transitioned into the Recovery Phase

What is it?
Chlorhexidine (CHX) is a simple, cost effective intervention to reduce neonatal mortality

Antiseptic applied to the umbilical cord

Costs just 23 cents per tube in Nepal

What’s the impact?
Reduces neonatal mortality by 23% and serious cord infections by 68%
From pilot to scale up in the recovery phase:
Nepal project has been scaled up to nearly all districts to save nearly 8,000 lives
25 countries have visited to learn from Nepal’s program
6 of those have implemented programs
5 of those are managed by or in partnership with JSI
CHX now one of essential components included in RH Kits in emergency relief situations – was a crucial commodity delivered following two major earthquakes in spring 2015
CONCLUSIONS
• **Increase data visibility of supply plan**, demand patterns and stock on hand data so manufactures upstream and customers downstream can have increased understanding of the supply status → enable better supply planning at all levels.

• Design and implement a **dynamic, industry-standard max-min inventory control procedure**, frequently reviewing consumption patterns and potentially applying predictive analytics → reducing backorders and enabling more timely response to demand volatility

• **Develop guidelines and capacity building tools on global, regional and national prepositioning and best supply chain management practices to bridge** from emergency supply chain and institutionalized (national) systems.
Invest in **more reliable and accurate data for decision making** on commodity needs, demographic patterns and service consumption/utilization statistics → strengthened planning, and impact measurement, and data visibility

Develop **guidance on shifts by phase (emergency response, protracted emergency & recovery phase)**. Employ forecasting, product registration, and supply practices that move from acute toward comprehensive service provision

Refine **supply chain roles and responsibilities** among all partners, including product financing, procurement, ordering, and delivery paths

Increase **data visibility of supply plan**, demand patterns, stock on hand, allowing manufacturers upstream and customers downstream to understand supply status, yielding better supply planning at all levels

Agile and responsive supply chains can ensure a continuous flow of products during a protracted crisis and in the recovery phase

Because emergencies are unpredictable, and rapid response is crucial to saving and protecting lives, financing and supply chains for emergency commodities need to be even more responsive and robust and countries need clear guidance (and alternatives) about when to use kits in protracted emergencies and how to transition during the recovery phase to a more stable system.
A strengthened global response bridging the divide between development and humanitarian response can improve health worldwide

- **Strengthen**— (“the how”) coordination across platforms for all partners.
- **Improve planning** (the “when”): accelerate development planning (emergency development) and broaden the horizon of humanitarian action to address the “mid-term”.
- **Put the SDGs at the center** (the “what”) clear goals defined by the international community. Ensure that humanitarian-development actions compatible/inspired by humanitarian principles and under SDGs.
- **The “why”**- prevention, prevention and prevention. Acting quickly when alarm bells of fragility ring.
- **And finally, the “money”**. With donor support, donors must integrate funds for joint programming between humanitarian and development actors.

Photos: UNFPA.org
For more on JSI’s work in supply chain, JSI Center for Health Logistics
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